RECEIVED

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

391418 OMB APPROVAL OMB Number:

3235-0076 Expires: April 30, 2008

Estimated average burden

Name of Offering (check if this is an an PLACE/BV STUDENT HOUSING FUND, LLC	endment and nar	ne has changed, and	indicate change.	.)	
Filing Under (Check box(es) that apply):	□ Rule 504	☐ Rule 505	☑ Rule 506	☐ Section 4(6)	□ULOE
Type of Filing: □New Filing	⊠ Amendment				PPOOF
	A. BAS	SIC IDENTIFICA	ATION DATA		" HUCESSED
1. Enter the information requested about the issue	er				7
Name of Issuer (check if this is an amendment an	d name has chang	ged, and indicate cha	inge.)		APR 0.9 2007 AT
PLACE/BV STUDENT HOUSING FUND, LLC					7.11.4.0.2007
Address of Executive Offices	(Number and St	reet, City, State, Zip	Code)	Telephone Number	(Including Area Code)
One North Franklin Street, Ste. 450, Chicago, IL	60606			312-578-0033	EIAIANO
Address of Principal Business Operations	(Number and St	reet, City, State, Zip	Code)	Telephone Number	(Including Add Con-
(if different from Executive Offices)				<u>. l</u>	
Brief Description of Business: This is a real estate	investment fund b	peing formed to mal	e private equity	and equity-oriented inve	stments in a diversified portfolio of
student housing, both existing and to be developed,	properties located	throughout the U.S	•		
Type of Business Organization	_			_	
☐ corporation	•	rship, already forme	d	■ other (please specify)): limited liability company
☐ business trust	☐ limited partne	ership, to be formed			
		Month	Year		
Actual or Estimated Date of Incorporation or Organi	zation:	0 1	0 16	■Actual	☐ Estimated
Jurisdiction of Incorporation or Organization: (Ente	r two-letter U.S. I	Postal Service abbre	viation for State:		
	CN for Canada;	FN for other foreign	jurisdiction)	DE	

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Each beneficial own 	ne issuer, if the issue ner having the powe cer and director of o	er has been organized within the er to vote or dispose, or direct the corporate issuers and of corpora	ne vote or disposition of, 10%		f equity securities of the issuer; ssuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	图Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Phillips, Cecil					
Business or Residence Address One North Franklin Stre		•	· · ·		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if it Clark, Robert E.	ndividual)	٠			
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
One North Franklin Stree	t, Ste. 450, Chica	ıgo, IL 60606			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Byron, Robert G.	•				
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
One North Franklin Stree	•	•			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Huber, George B.					
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			·
One North Franklin Street	t, Ste. 450, Chica	ıgo, IL 60606			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	□Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Stelian, Peter					
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
One North Franklin Street	t, Ste. 450, Chica	ıgo, IL 60606			
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	□Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
New Mexico State Investmen	t Council				a.
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
2055 South Pacheco, Suite 10	0, Santa Fe, New I	Mexico 87505			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	□Director	☐ General and/or Managing Partner
Full Name (Last name first, if it	ndividual)				
PBV Fund Private Limited					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
aloCIC Pool Fetato Inc. 156	Wast Eath Strant	Suite 1990 New York NV 10	010		

Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	□Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
State of Wisconsin Investme	nt Board				
			· · ·		

Business or Residence Address (Number and Street, City, State, Zip Code)

Portfolio Manager - Real Estate Separate Accounts, State of Wisconsin Investment Board, 121 East Wilson Street, Madison 53703

937 3 PG	y ayda.	tura y Jest Bor for (B. IN	NFORMAT	ION ABOU	TOFFER	ING			minumi.	
												Yes	Ņo
1.	Has the	e issuer sold	l, or does th	e issuer inte	nd to sell, Answer also	to non-accr in Appendix, C	edited invest column 2, if filin	tors in this o g under ULOE.	offering?		•••	. 🗆	×
2	Whati	a dha minim	um invastm	ant that wil	l ha accont	ad from any	individual?					\$ 5.00	*00,000
2.												Yes	No
3.	Does th	ne offering p	permit joint	ownership	of a single	unit?			***************************************	*******************		. 🗷	
4.									directly or in				
									s in the offer				
									vith a state o ich a broker				
				r or dealer o		e noted are	associated p	0.30115 01 50	ion a crono.	0. 404.0., ,	ou may our .		
Full			first, if indiv			_							
NO	NE												·
Busi	ness or	Residence.	Address (N	umber and S	Street, City	, State, Zip	Code)						
							-		<u> </u>				
Nam	e of As	sociated Br	oker or Dea	ler									
						0.11.1.0							
State			~	Solicited or									
	(Check	"All States	or check	individual S	tates)							□ All S	tates
[AL	-	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT	_	[IN] [NE]	[IA] [NV]	(KS) [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI		[SC]	[SD]	[TN]	(XT)	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last name f	first, if indiv	vidual)									<u>-</u>
Busi	ness or	Residence .	Address (N	umber and S	Street, City,	, State, Zip	Code)						·
Nam	e of As	sociated Br	oker or Dea	ler									
State	es in Wi	nich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers	•					;
	(Check	"All States	" or check	individual S	tates)							□ All S	tates
[AL	·	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL	_	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	(MS)	[MO]
[MT		[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	(ND)	[OH]	[OK]	(OR) [WY)	[PA] [PR]
[RI		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[AV]	[WA]	[WV]	[MT]	[MI]	[PK]
Full	Name (Last name i	first, if indiv	ridual)									
Busi	ness or	Residence .	Address (N	umber and S	Street, City,	, State, Zip	Code)						
Nam	e of As	sociated Bro	oker or Dea	ler								· 	·
State	s in W	nich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers						
												□ All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
(MT (RI		[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	(MM) (UT)	[NY] [VT]	(NC) (VA)	[MN] [WA]	[OH] [WV]	[OK]	[OR] [WY]	[PA] [PR]
LALL	,	[00]	,,	F = T4 1	[117]	[01]	r * * 1	[412]	[*** 7]		· · · · · · · ·	F 7 1	(+ +>)

⁽Use blank sheet, or copy and use additional copies of this sheet, as necessary.)
*Manager may accept a smaller amount in its sole discretion.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggreg Offering		An ·	Sold
	Debt	\$0		\$	0 :
	Equity	\$ 0		\$	0
	□ Common □ Preferred				
	Convertible Securities (including warrants)	\$0_		\$	0 '
	Partnership Interests	\$		\$. "
	Other (Specify) LLC INTERESTS	\$280,000,00	00.00	\$ <u>280,</u>	00.000.00
	Total	\$280,000,00	00 00	\$280 (.00.000,000
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ <u>200,000,0</u>	00.00	<u> </u>	,
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				9
	•	Numb Investo		Do o	Aggregate ollar Amount f Purchases
	Accredited Investors				00.000,000
	Non-accredited Investors				
3.	Non-accredited Investors Total (for filings under Rule 504 only)			\$ \$	
3.	Total (for filings under Rule 504 only)			\$	
3.	Total (for filings under Rule 504 only)		of	\$	
3.	Total (for filings under Rule 504 only)	Type o	of	\$	ollar Amount
3.	Total (for filings under Rule 504 only)	Type o	of ty	\$	ollar Amount Sold 2
3.	Total (for filings under Rule 504 only)	Type Securi	of ty	\$	ollar Amount Sold 2
3.	Total (for filings under Rule 504 only)	Type o	of ty	\$	ollar Amount
3. 4.	Total (for filings under Rule 504 only)	Type o	of ty	\$	ollar Amount Sold ?
	Total (for filings under Rule 504 only)	Type o	of ty	\$	ollar Amount Sold 2
	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	Type of Securi	of ty	\$	ollar Amount Sold 2
	Total (for filings under Rule 504 only)	Type Securi	of ty	\$\$ \$\$ \$\$ \$\$	ollar Amount Sold 2
	Total (for filings under Rule 504 only)	Type of Securi	of ty	\$\$ \$\$ \$\$ \$\$	ollar Amount Sold ?
	Total (for filings under Rule 504 only)	Type of Securi	of ty	\$\$ \$\$ \$\$ \$\$ \$\$	bllar Amount Sold ²
	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees.	Type of Securi	of ty	\$\$ \$\$ \$\$ \$\$ \$\$	bilar Amount Sold 2
	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees. Engineering Fees.	Type of Securi	of ty	\$\$ \$\$ \$\$ \$\$ \$\$	ollar Amount Sold ²

		t C-Question 4.a. This difference is the "adjusted g		\$ <u>_2</u>	79,840,000
	shown. If the amount for any purpose is not	ross proceeds to the issuer used or proposed to be t known, furnish an estimate and check the box to ljusted gross proceeds to the issuer set forth in resp	the left of the estimate	ite. The	
		. •		Payments to Officers, Directors & Affiliates	Payments to Others
	Salaries and fees			\$	□ \$
	Purchase of real estate			\$	■ \$ 279,840,000
	B. about a mount of books and books.		-	c	
		ation of machinery and equipmentgs and facilities			□ \$
	• •	ng the value of securities involved in this		J	L 3
	offering that may be used in exchange f				
	issuer pursuant to a merger)				□ \$
	Repayment of indebtedness			\$	S
	Working capital			\$	□ \$
	Other (specify): Investment and Secur	ities		\$	□ \$
	· · ·				
					D \$
					279,840,000
	Total Payments Listed (column totals ad	lded)	***************************************	≥ \$ <u>279</u>	<u>,840,000</u>
ngt and	Norse profite english na <mark>va entine</mark> nsidese de ne <mark>ll'eduteu</mark> s de le comme	D. FEDERAL SIGNATURE			1 P#8022517538231771650. 3 0165
	STATION TO DE TRECOGNITION DE LICONOGRAPIONE LE LA CONTRACTION DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DEL CONTRACTION DE LA C	A LEED BRAD SIGNATURE SAN			j
		by the undersigned duly authorized person. If this			
	r to any non-accredited investor pursuant to pa	to the U.S. Securities and Exchange Commission, that aragraph (b)(2) of Rule 502.	ipon written request c	or its stair, the inform	ation turnished by the
	(Print or Type) BV Student Housing Fund, LLC	Signature Path Ital	<u></u>	Date March <u>Z3</u> , 2007	1
	e of Signer (Print or Type) Stellan	Title of Signer (Print or Type) Authorized Person of BVV Managers, 1	LLC, the Manager o	f Place/BV Student	Housing Fund, LLC
		O			

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1477		<u> 14 </u>	175	E. STATE SIGNATURE		2.2.	
1.	Is any party described in 17	CFR 230.	.262 presently subjec	t to any of the disqualification provisions of suc	th rule?	Yes	No E
			See Appendix,	Column 5, for state response.		_	

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Place/BV Student Housing Fund, LLC	Signature	te	til	<u> </u>	Date March <u>23</u> , 2007
Name of Signer (Print or Type) Peter Stelian	Title of Signer (Pr Authorized Perso			, LLC, the Manager of	Place/BV Student Housing Fund, LLC

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		2	3			4		:	5
	non-ac	to sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item I)		purcha	estor and amount ised in State C-Item 2)		State (if yes explanatio grai	ation under ULOE , attach n of waiver nted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									i
со									
СT									
DE									
DC									
FL									
GA		х	Class B Units	1	\$2,000,000	0	\$0.00		х
ні									
ID									_
IL		Х	Class A Units and Class B Units	3	\$2,292,626	0	\$0.00		х
IN		х	Class A Units	1	\$708,375	0	\$0.00		Х
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS						·			
МО				- · · - · ·					
MT									

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1		2	3		4					
	non-ac	to sell to credited is in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		purcha	estor and amount used in State C-Item 2)	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NE										
NV	 							,		
NH										
ŊJ						,				
NM		х	Class B Units	1	\$50,000,000	0	\$0.00		х	
NY		х	Class B Units	1	\$125,000,000	0	\$0.00		х	
NC										
ND										
ОН		İ								
ОК	-			ts.						
OR				-						
PA										
RI		i		• .						
sc				1 -						
SD										
TN										
TX				-						
UT										
VT										
VA										
WA										
WV										
WI		х	Class B Units	1	\$100,000,000	0	\$0.00		X	
WY										
PR										

